

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BT		8-25-99
O.I.P.E. CLASSIFIER		12/	8/27/99
FORMALITY REVIEW		69652	89/02/99

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
1	12/31/99
2	12/31/99
3	12/31/99
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY If more than 150 claims or 10 actions  
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